	this form, together with	SC148 32	or <u>Fax</u>	(703) 746-4000	for Patents ginia 22313-1450	hould be completed when
appropriate. All further coindicated unless corrected maintenance fee notification	rm should be used for tran respondence including the below or directed properties.	Patent, advance of in Block 1, by (a	rders and notification  a) specifying a new of	of maintenance fees correspondence address	uired). Blocks 1 through 5 s will be mailed to the current s; and/or (b) indicating a sepa	correspondence address a arate "FEE ADDRESS" for
	CE ADDRESS (Note: Use Block 1 for 590 04/22/2005	any change of address)		Note: A certificate o Fee(s) Transmittal. T papers. Each addition have its own certifica	f mailing can only be used for his certificate cannot be used hal paper, such as an assignmente of mailing or transmission.	or domestic mailings of the for any other accompanying ent or formal drawing, mu
PHILIPS INTEL P.O. BOX 3001 BRIARCLIFF MA	LECTUAL PROPER NOR, NY 10510	RTY & STAN	IDARDS	I hereby certify that of States Postal Service addressed to the Mattansmitted to the US	ertificate of Mailing or Trans this Fee(s) Transmittal is bein with sufficient postage for fir all Stop ISSUE FEE address PTO (703) 746-4000, on the co	smission g deposited with the Unite st class mail in an envelop above, or being facsimi date indicated below.
				EDNA	CHAPA	(Depositor's name
25/2005 RMEBRAH1 00000066 141270 10785494 FC:1501 1400.00 DA				Edu	u Chape	(Signature
					1/20/05	(Date
FC: 1501 1400.00 FC: 1504LICATION NO.00		FIRST NAMED INV		NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/785,494	02/24/2004	<u> </u>	Peter W. Green		GB 010187A	9884
		ISSUE FEE				
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
APPLN. TYPE nonprovisional	SMALL ENTITY NO	ISSUE F \$1400		UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE 07/22/2005
nonprovisional			)			
nonprovisional EXAM	NO	\$1400	OUIT C	\$300		
nonprovisional  EXAM PHAM,  1. Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicat	NO  MINER , LONG e address or indication of "Fedence address (or Change of 22) attached. tion (or "Fee Address" Indication (or "Fee	\$1400 ART UN 2814 ee Address" (37 Correspondence	2. For printing on (1) the names of or agents OR, alte (2) the name of a registered attorne	\$300  CLASS-SUBCLASS  438-154000  the patent front page, I up to 3 registered paternatively, single firm (having as y or agent) and the nar	\$1700	07/22/2005
nonprovisional  EXAM PHAM,  1. Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicat	NO  MINER  , LONG  e address or indication of "Fedence address (or Change of (22) attached.	\$1400 ART UN 2814 ee Address" (37 Correspondence	2. For printing on (1) the names of or agents OR, alte (2) the name of a registered attorne	\$300  CLASS-SUBCLASS  438-154000  the patent front page, I up to 3 registered paternatively, single firm (having as y or agent) and the nar t attorneys or agents. I	\$1700	07/22/2005
nonprovisional  EXAM  PHAM,  1. Change of correspondence  CFR 1.363).  Change of correspond  Address form PTO/SB/17  "Fee Address" indicat  PTO/SB/47; Rev 03-02 of  Number is required.  3. ASSIGNEE NAME AND	NO  MINER , LONG e address or indication of "Fedence address (or Change of (22) attached. tion (or "Fee Address" Indicator more recent) attached. Use	\$1400 ART UN 2814 ee Address" (37 Correspondence ation form e of a Customer	2. For printing on (1) the names of or agents OR, alte (2) the name of a registered attorne 2 registered paten listed, no name w THE PATENT (print	\$300  CLASS-SUBCLASS  438-154000  the patent front page, I up to 3 registered paternatively, single firm (having as y or agent) and the nart attorneys or agents. It ill be printed.  or type)	\$1700	07/22/2005
nonprovisional  EXAM PHAM,  1. Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.  3. ASSIGNEE NAME AND	NO  MINER , LONG e address or indication of "Fedence address (or Change of (22) attached. tion (or "Fee Address" Indicator more recent) attached. Use	\$1400 ART UN 2814 ee Address" (37 Correspondence ation form e of a Customer	2. For printing on (1) the names of or agents OR, alte (2) the name of a registered attorne 2 registered paten listed, no name w THE PATENT (print	\$300  CLASS-SUBCLASS  438-154000  the patent front page, I up to 3 registered paternatively, single firm (having as y or agent) and the nart attorneys or agents. It ill be printed.  or type)	\$1700	07/22/2005
nonprovisional  EXAM PHAM,  1. Change of correspondenc CFR 1.363).  Change of correspond Address form PTO/SB/1:  "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGN KONIN	NO  MINER  , LONG  dence address or indication of "Formation of "Formation (or "Fee Address" Indication	\$1400 ART UN 2814 ee Address" (37 Correspondence ation form e of a Customer E PRINTED ON Tellow, no assignee of this form is NO	2. For printing on (1) the names of or agents OR, alte (2) the name of a registered attorne 2 registered paten listed, no name w THE PATENT (print data will appear on T a substitute for filir	\$300  CLASS-SUBCLASS  438-154000  the patent front page, I up to 3 registered paternatively, single firm (having as y or agent) and the nart attorneys or agents. It ill be printed.  or type)	\$1700  List ent attorneys 1 a member a 2 nes of up to f no name is 3  nee is identified below, the doubtery)	07/22/2005
nonprovisional  EXAM PHAM,  1. Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/17  "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGN  KONIN  ELECT	NO  MINER  , LONG  e address or indication of "Fedence address (or Change of 22) attached.  tion (or "Fee Address" Indicator more recent) attached. Use  ORESIDENCE DATA TO B  an assignee is identified be a 37 CFR 3.11. Completion of 22 CFR 3.11. Completion of 24 CFR 3.11. Complexity of 25 C	\$1400 ART UN 2814 ee Address" (37 Correspondence ation form e of a Customer E PRINTED ON Telow, no assignee of this form is NO	2. For printing on (1) the names of or agents OR, alte (2) the name of a registered attorne 2 registered paten listed, no name w THE PATENT (print data will appear on T a substitute for filing) RESIDENCE: (CITE Eindhove	\$300  CLASS-SUBCLASS  438-154000  the patent front page, I up to 3 registered pate trnatively, single firm (having as y or agent) and the nart attorneys or agents. I ill be printed.  or type) the patent. If an assig g an assignment.  TY and STATE OR CO	\$1700  list ent attorneys  a member a 2 mes of up to f no name is 3  mee is identified below, the do  DUNTRY)  lands	07/22/2005
nonprovisional  EXAM PHAM,  1. Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGN  KONIN  ELECT  Please check the appropriate	NO  MINER  , LONG  de address or indication of "Formation of "Formation (or "Fee Address" Indication (or "Fee Address" Indication (or "Fee Address" Indicator more recent) attached. Use an assignee is identified be a 37 CFR 3.11. Completion of EE  IKLIJKE PHI  RONICS N.V  cassignee category or category or category	\$1400  ART UN  2814  see Address" (37  Correspondence  ation form  of a Customer  E PRINTED ON To  clow, no assignee of this form is NO  (E  LIPS  ries (will not be pr	2. For printing on (1) the names of or agents OR, alte (2) the name of a registered attorne 2 registered paten listed, no name w THE PATENT (print data will appear on T a substitute for filir B) RESIDENCE: (CITEING COMME	\$300  CLASS-SUBCLASS  438-154000  the patent front page, I up to 3 registered pate trnatively, single firm (having as y or agent) and the nart attorneys or agents. I ill be printed.  or type) the patent. If an assig g an assignment.  TY and STATE OR CO	\$1700  List ent attorneys 1 a member a 2 nes of up to f no name is 3  nee is identified below, the doubtery)	07/22/2005
nonprovisional  EXAM PHAM,  1. Change of correspondence CFR 1.363).  Change of correspondence Address form PTO/SB/17  "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGN  KONIN  ELECT  Please check the appropriate  4a. The following fee(s) are	NO  MINER  , LONG  de address or indication of "Formation of "Formation (or "Fee Address" Indication (or "Fee Address" Indication (or "Fee Address" Indicator more recent) attached. Use an assignee is identified be a 37 CFR 3.11. Completion of EE  IKLIJKE PHI  RONICS N.V  cassignee category or category or category	\$1400  ART UN  2814  see Address" (37  Correspondence  ation form  of a Customer  E PRINTED ON To  clow, no assignee of this form is NO  (E  LIPS  ries (will not be pr	2. For printing on (1) the names of or agents OR, alte (2) the name of a registered attorne 2 registered paten listed, no name w THE PATENT (print data will appear on T a substitute for filir B) RESIDENCE: (CIT Eindhoven	\$300  CLASS-SUBCLASS  438-154000  the patent front page, I up to 3 registered paternatively, single firm (having as y or agent) and the nart attorneys or agents. It all be printed.  or type)  the patent. If an assigned an assignment.  TY and STATE OR COLOR, The Nether	\$1700  Sist  Ent attorneys  a member a 2 2 3  nee is identified below, the depointment of the private ground o	07/22/2005
nonprovisional  EXAM PHAM,  1. Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/1:  "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGN: KONIN ELECT  Please check the appropriate  4a. The following fee(s) are	NO  MINER  , LONG  de address or indication of "Formation of "Formation (or "Fee Address" Indication (or "Fee Address" Indication (or "Fee Address" Indicator more recent) attached. Use an assignee is identified be a 37 CFR 3.11. Completion of EE  IKLIJKE PHI  RONICS N.V  cassignee category or category or category	\$1400  ART UN  2814  see Address" (37  Correspondence  ation form  of a Customer  E PRINTED ON To  clow, no assignee of this form is NO  (E  LIPS  ries (will not be pr	2. For printing on (1) the names of or agents OR, alte (2) the name of a registered attorne 2 registered paten listed, no name w THE PATENT (print data will appear on T a substitute for filir B) RESIDENCE: (CIT Eindhoven the patent):  D. Payment of Fee(s):  A check in the au Payment by cred	\$300  CLASS-SUBCLASS  438-154000  the patent front page, I up to 3 registered paternatively, single firm (having as y or agent) and the nart attorneys or agents. It allows a sign and assignment.  TY and STATE OR COMEN, The Nether Individual Commount of the fee(s) is edit card. Form PTO-203	\$1700  list ent attorneys  a member a 2 nes of up to f no name is 3  nee is identified below, the do  DUNTRY)  lands  Corporation or other private grantlesed. 8 is attached.	07/22/2005
nonprovisional  EXAM PHAM,  1. Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/1:  "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGN: KONIN ELECT  Please check the appropriate  4a. The following fee(s) are	NO  MINER , LONG  e address or indication of "Formula dence address (or Change of (22) attached.  tion (or "Fee Address" Indicator more recent) attached. Use an assignee is identified be a 37 CFR 3.11. Completion of EE  IKLIJKE PHITERONICS N.V  c assignee category or category enclosed:  mall entity discount permittee	\$1400  ART UN  2814  see Address" (37  Correspondence  ation form  of a Customer  E PRINTED ON To  clow, no assignee of this form is NO  (E  LIPS  ries (will not be pr	2. For printing on (1) the names of or agents OR, alte (2) the name of a registered attorne 2 registered paten listed, no name w THE PATENT (print data will appear on T a substitute for filir B) RESIDENCE: (CIT Eindhoven the patent):  D. Payment of Fee(s):  A check in the au Payment by cred	\$300  CLASS-SUBCLASS  438-154000  the patent front page, I up to 3 registered paternatively, single firm (having as y or agent) and the nart attorneys or agents. It allows a sign and assignment.  TY and STATE OR COMEN, The Nether Individual Commount of the fee(s) is edit card. Form PTO-203	\$1700  list ent attorneys 1 a member a nes of up to f no name is 3  nee is identified below, the do DUNTRY)  lands  Corporation or other private granclosed.	07/22/2005

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Bram

ERic

M.

Authorized Signature

Typed or printed name

Registration No. \_